

Tennessee Health Care Innovation Initiative

TennCare Episodes of Care Thresholds

Scope of the Document

This goal of this document is to provide an overview of the thresholding process used to calculate rewards and penalties for Episode of Care Quarterbacks.

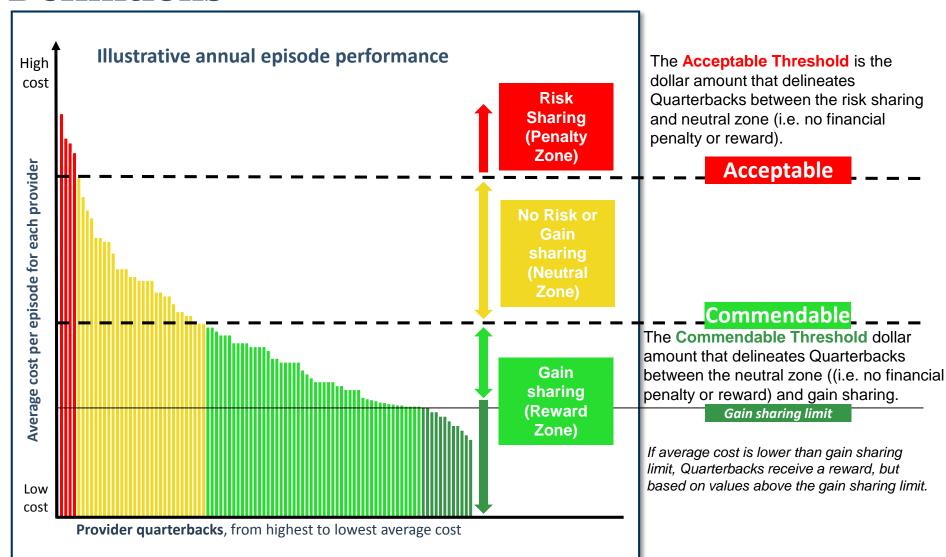
The document will review the following topics:

- 1. Overview of Episodes of Care Thresholds
- 2. Threshold values for 2018 Performance Period

Updates from Previous Thresholds (CY 2017)

- Acceptable Thresholds have been updated for some episodes based on the most recent data
- □ Episodes in Waves 5 & 6 have thresholds for the first time. These episodes are in the performance period in 2018 for the first time.
- Additional gain sharing quality metrics have been added to the ADHD episode.
- □ For two existing episodes, the Quality Metric Thresholds have been revised since 2017.
 - ODD: Minimum Care Requirement
 - Asthma: Patient on appropriate medication (oral corticosteroid and/or injectable corticosteroids)

TennCare Episode of Care thresholds: Definitions



^{*}Reference slide 6 for additional information

Calculating Thresholds

Calculation

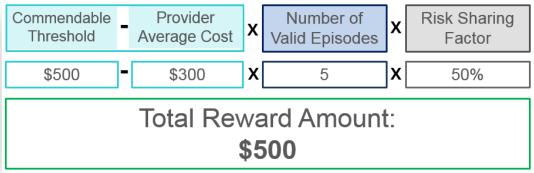
	Risk Sharing (Penalty Zone)	Above the Acceptable Threshold	Quarterbacks who owe a risk sharing payment pay 50% of the difference between the Acceptable Threshold and their average risk-adjusted episode spend, multiplied by the Quarterback's number of valid episodes in the reporting period.
-	No Risk or Gain Sharing (Neutral Zone)	Between the Acceptable and Commendable Threshold	Quarterbacks have no change in payment, neither a reward or a penalty for the year.
	Gain Sharing (Reward Zone)	Below the Commendable Threshold	Quarterbacks receive 50% of the difference between the Commendable Threshold and their average risk-adjusted episode, multiplied by the Quarterback's number of valid episodes in the reporting period.

Example Gain Sharing Calculation

Threshold included in calculation: Commendable

Average Cost per Episode Type





*Must reach quality metrics to be eligible for a reward

Additional Information on Episodes of Care Thresholds

Key Threshold Information

- All thresholds are set before the performance year begins.
- Thresholds are set based on projections that result in overall budget neutrality (i.e. equivalent total rewards and penalties).
- Commercial payers will set their own thresholds according to their own approaches. Commercial episodes will not have an Acceptable Threshold due to no downside risk.

Overview of Setting Thresholds: 2018 Performance Period

- Acceptable threshold: TennCare sets the Acceptable Threshold so that the Quarterbacks with the highest risk-adjusted average annual cost for all TennCare would see a penalty, based on 2016 data.
- Commendable threshold: Each MCO sets its own Commendable Thresholds that determines a Quarterbacks' eligibility for a gain-share reward. For the 2018 performance period, the Commendable Threshold is set such that total reward and penalty dollar amounts would be equal, based on 2016 data. Information on the commendable threshold is available from each MCO.
- Gain sharing limit threshold: The Gain Sharing Limit is designed to cap the amount of rewards a
 Quarterback can receive to prevent incentivizing underutilization and inappropriate care. The
 MCOs and the state work together to define and set the Gain Sharing Limit.
- Quality metrics linked to gain-sharing thresholds: Some quality metrics will be linked to gain sharing, while others will be reported for information only. To be eligible for gain sharing, providers must meet predetermined thresholds for gain sharing linked quality metrics.

Episodes of Care Thresholds for Performance Period 2018

Wave 1 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
	C-Section rate	41%		
	Group B streptococcus screening rate	85%		
Perinatal	HIV screening rate	85%	\$8,215	Varies by
rematai	 Quality metrics not linked to gain sharing (i.e., informational only): Gestational diabetes screening rate Asymptomatic bacteriuria screening rate Hepatitis B screening rate Tdap vaccinate rate 		ΨΟ,Σ13	MCO
	Follow-up with physician or other practitioner within 30 days of discharge	30%	\$1,394	
	Patient on appropriate medication (oral corticosteroid and/or injectable corticosteroids)	60%		
Asthma	 Quality metrics not linked to gain sharing (i.e., informational only): Repeat acute exacerbation during the post-trigger window Acute exacerbation during the trigger window is treated in an inpatient setting (as percent of all episodes) Smoking cessation counseling for the patient and/or family was offered Education on proper use of medication, trigger avoidance, or asthma action plan was discussed Chest x-ray utilization rate 			Varies by MCO
	No quality metrics linked to gain sharing			
Total Joint Replacement	Quality metrics not linked to gain sharing (i.e., informational only): Readmission rate Post-op deep venous thrombosis (DVT)/Pulmonary Embolism (PE) within 30 days post-surgery Post-op wound infection rate within 90 days post-surgery Dislocations or fractures within 90 days post-surgery Average inpatient length of stay		\$15,945	Varies by MCO

Wave 2 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
	Percent of valid episodes performed in a facility participating in a Qualified Clinical Data Registry	25%		
Colonoscopy	 Quality metrics not linked to gain sharing (i.e., informational only): Perforation of colon during the trigger or post-trigger windows Post-polypectomy/biopsy bleeding during the trigger or post-trigger windows Prior colonoscopy: screening, surveillance, or diagnostic colonoscopy within 1 year prior to the triggering colonoscopy Repeat colonoscopy: screening, surveillance, or diagnostic colonoscopy within 60 days after the triggering colonoscopy 		\$1,525	Varies by MCO
	Hospitalization in the post-trigger window	10%	\$6,312	Varies by MCO
Outpatient and Non-Acute Cholecystect- omy	 Quality metrics not linked to gain sharing (i.e., informational only): Intraoperative cholangiography during the trigger window Endoscopic retrograde cholangiopancreatography (ERCP) within 3 to 30 days after procedure Average length of stay 			
	Percent of episodes where the patient visits a physician or other practitioner during the post-trigger window	40%	\$3,300	Varies by MCO
COPD Acute Exacerbation	 Quality metrics not linked to gain sharing (i.e., informational only): Repeat acute exacerbation during the post-trigger window Acute exacerbation during the trigger window is treated in an inpatient setting (as percent of all episodes) Smoking cessation counseling for the patient and/or family was offered 			

Wave 2 (cont.) – Thresholds

Episode	Episode Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
	Hospitalization in the post-trigger window (excluding hospitalizations for repeat PCI)	10%	\$13,384	Varies by MCO
PCI – Acute	Quality metrics not linked to gain sharing (i.e., informational only): Multiple-vessel PCI: professional trigger claim involves multiple vessels (including multiple branches) Staged PCI: repeat PCI in the post-trigger window			
	Hospitalization in the post-trigger window (excluding hospitalizations for repeat PCI)	10%		
PCI – Non Acute	Quality metrics not linked to gain sharing (i.e., informational only): Multiple-vessel PCI: professional trigger claim involves multiple vessels (including multiple branches) Staged PCI: repeat PCI in the post-trigger window		\$11,566	Varies by MCO

Wave 3 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
	Percent of valid episodes performed in a facility participating in a Qualified Clinical Data Registry	25%	\$1,769	
Upper GI Endoscopy (Esophagogas troduodenosc opy (EGD))	 Quality metrics not linked to gain sharing (i.e., informational only): Percent of valid episodes performed in a facility participating in a Qualified Clinical Data Registry Emergency department visit within the post-trigger window Admission within the post-trigger window Perforation within upper gastrointestinal tract Biopsy specimens in cases of gastrointestinal ulcers or suspected Barrett's esophagus 			Varies by MCO
	No quality metrics linked to gain sharing Quality metrics not linked to gain sharing (i.e., informational			
Respiratory Infection	 only): Emergency department visit within the post-trigger window Admission within the post-trigger window Antibiotic injection for Strep A sore throat Steroid injection for Strep A sore throat 		\$172	Varies by MCO
	Follow-up care within the post-trigger window	30%		Varies by MCO
Pneumonia	Quality metrics not linked to gain sharing (i.e., informational only): Follow-up care within the first seven days of post-trigger window Emergency department visit within the post-trigger window Admission within the post-trigger window Follow-up visit versus emergency department visit Pseudomembranous colitis within the post-trigger window		\$2,192	

Wave 3 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
	Admission within the trigger window for ED triggered episodes	5%		Varies by MCO
	Admission within the trigger window for non-ED triggered episodes	5%		
Urinary Tract Infection (UTI)- Outpatient	Quality metrics not linked to gain sharing (i.e., informational only): • Emergency department visit within the post-trigger window • Admission within the post-trigger window • Pseudomembranous colitis within the post-trigger window • Urinalysis performed in the episode window • Renal ultrasound for children under two years old within the post-trigger window		\$228	
	Follow-up care within the post-trigger window	40%		
Urinary Tract Infection (UTI)- Inpatient	Quality metrics not linked to gain sharing (i.e., informational only): • Follow-up care within the first seven days of post-trigger window • Emergency department visit within the post-trigger window • Admission within the post-trigger window • Follow-up visit versus emergency department visit • Pseudomembranous colitis within the post-trigger window		\$5,834	Varies by MCO
	Follow-up care within the post-trigger window	40%		
Gastrointestinal Hemorrhage (GIH)	Quality metrics not linked to gain sharing (i.e., informational only): Follow-up care within the first seven days of post-trigger window Emergency department visit within the post-trigger window Admission within the post-trigger window Follow-up visit versus emergency department visit Pseudomembranous colitis within the post-trigger window Mortality within the episode window		\$6,028	Varies by MCO

Wave 4 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
	Minimum care requirement (5 visits/claims during the episode window)	70%		
	Long-acting stimulants for members aged 4 and 5 years	80%		
	Long-acting stimulants for members aged 6 to 11 years	80%		
Attention Deficit	Long-acting stimulants for members aged 12 to 20 years	80%		
and Hyperactivity	Utilization of therapy for members aged 4 and 5 years	1 visit	\$2,048	Varies by
Disorder (ADHD)	 Quality metrics not linked to gain sharing (i.e., informational only): Utilization of E&M and medication management Utilization of therapy Utilization of level I case management Utilization of medication by age group Follow-up within 30-days of the trigger visit 		Ψ2,040	MCO
	Follow-up care within the post-trigger window	30%		
Bariatric Surgery	 Quality metrics not linked to gain sharing (i.e., informational only): Admission within the post-trigger window Emergency department visit within the post-trigger window Mortality within the episode window 		\$10,468	Varies by MCO
	Follow-up care within the post-trigger window	90%		
Coronary Artery Bypass Graft (CABG)	 Quality metrics not linked to gain sharing (i.e., informational only): Participation in a Qualified Clinical Data Registry Admission within the post-trigger window Major morbidity within the episode window Mortality within the episode window 		\$44,628	Varies by MCO

Wave 4 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
	Follow-up care within the post-trigger window	60%		
Congestive Heart Failure (CHF) Acute Exacerbation	 Quality metrics not linked to gain sharing (i.e., informational only): Follow-up care within the first seven days of post-trigger window Admission from the emergency department within the post-trigger window Admission within the post-trigger window Mortality within the episode window Utilization of functional status assessment 		\$9,334	Varies by MCO
	Minimum care requirement (6 therapy and/or level I case management visits during the episode window)	30%		
Oppositional Defiant Disorder (ODD)	 Quality metrics not linked to gain sharing (i.e., informational only): Medication with no comorbidity Prior ODD diagnosis Utilization (excluding medication) Utilization of therapy and level I case management 		\$2,195	Varies by MCO
	Follow-up care within the post-trigger window	90%		
Valve Repair and Replacement	 Quality metrics not linked to gain sharing (i.e., informational only): Participation in a Qualified Clinical Data Registry Admission within the post-trigger window Major morbidity in the episode window Mortality within the episode window 		\$84,095	Varies by MCO

Wave 5 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
	Minimum care requirement (5 visits/claims during the episode window)	25%		
	Utilization of benzodiazepines in children	5%		
Anxiety	 Quality metrics not linked to gain sharing (i.e., informational only): Hospitalizations and ED visits: Percentage of valid episodes with one or more anxiety-related hospitalizations or ED visits admission from the emergency department within the post-trigger window Follow-up visit within seven days of hospitalization or ED visit Utilization of related medication Utilization of therapy Utilization of assessment Utilization of benzodiazepines in adults 		\$924	Varies by MCO
	Bleeding up to two days following the procedure	10%		
Tonsillectomy	 Quality metrics not linked to gain sharing (i.e., informational only): Dexamethasone administration rate Rate of indicated concurrent tympanostomy Rate of absence of antibiotics Post-operative encounter rate Bleeding rate between the 3rd and 14th day 		\$3,526	Varies by MCO
	Otitis media with effusion (OME) episodes without antibiotics filled	25%		
	Non-OME episodes with amoxicillin	60%		
Otitis Media	 Quality metrics not linked to gain sharing (i.e., informational only): OME episodes without oral corticosteroid filled Tympanostomy when indicated Overall tympanostomy Follow-up encounter during post-trigger window Non-OME episodes without macrolide filled 		\$316	Varies by MCO

Wave 5 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
	Follow-up care within the post-trigger window	60%		
	Core needle biopsy rate	85%		
Breast Biopsy	 Quality metrics not linked to gain sharing (i.e., informational only): Follow-up care within the first seven days of post-trigger window Admission from the emergency department within the post-trigger window Admission within the post-trigger window Mortality within the episode window Utilization of functional status assessment 		\$2,721	Varies by MCO
	Minimum care requirement (5 visits/claims during the episode window)	60%		
	Utilization of benzodiazepines in children	5%		
Non-emergent Depression	Quality metrics not linked to gain sharing (i.e., informational only): Hospitalizations and ED visits Follow-up visit within seven days of hospitalization or ED visit Utilization of related medication Utilization of therapy Utilization of assessment Utilization of benzodiazepines in adults		\$2,797	Varies by MCO

Wave 6 – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
	Bacterial cultures when incision and drainage performed	50%		
	SSTI episodes with a first line antibiotic	85%		
SSTI	 Quality metrics not linked to gain sharing (i.e., informational only): Infection recurrence Hospitalizations after initial diagnosis ED visits after initial diagnosis Ultrasound imaging Non-ultrasound imaging Incision and drainage 		\$459	Varies by MCO
	Periodic anti-retroviral therapy (ART) refill	85%		
HIV	 Quality metrics not linked to gain sharing (i.e., informational only): Viral status reporting Infrequent ART refill New patients Viral suppression Preferred drug use HIV-related hospitalization HIV-related ED visit Screening for sexually transmitted infections (STIs) Screening for hepatitis C 		\$5,377	Varies by MCO

Wave 6 (cont.) – Thresholds

Episode	Quality Metrics Thresholds		Acceptable Threshold	Commendable Threshold
Diabetes Acute Exacerbation	Follow-up care in the first 14 days of the post-trigger window Quality metrics not linked to gain sharing (i.e., informational only): Follow-up care within the first seven days of post-trigger window Admission from the emergency department within the post-trigger window Admission within the post-trigger window Mortality within the episode window Utilization of functional status assessment	30%	\$8,361	Varies by MCO
Pancreatitis	Follow-up care in the first 14 days of the post-trigger window Quality metrics not linked to gain sharing (i.e., informational only): Nutritional counseling New narcotics prescription Multiple narcotics prescription Relevant readmission in the post-trigger window ED visit in the post-trigger window ERCP performed in the post-trigger window Cholecystectomy performed in the post-trigger window Relevant laboratory test in the first 14 days of the post-trigger window	30%	\$8,837	Varies by MCO

Contact Information

- Questions? Email <u>payment.reform@tn.gov</u>
- More information on Episodes of Care: https://www.tn.gov/tenncare/topic/episodes-of-care

